

10/626103

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET

SERIAL NO.

FILED DATE

APPLICANT(S)

CLAIMS

|              | AS FILED     |              | AFTER 1ST AMENDMENT |     | AFTER 2ND AMENDMENT |     |
|--------------|--------------|--------------|---------------------|-----|---------------------|-----|
|              | IND          | DEP          | IND                 | DEP | IND                 | DEP |
| 1            | /            |              |                     |     |                     |     |
| 2            | /            |              |                     |     |                     |     |
| 3            | /            |              |                     |     |                     |     |
| 4            | /            |              |                     |     |                     |     |
| 5            | <del>/</del> | <del>/</del> |                     |     |                     |     |
| 6            | /            |              |                     |     |                     |     |
| 7            | /            |              |                     |     |                     |     |
| 8            | /            |              |                     |     |                     |     |
| 9            | /            |              |                     |     |                     |     |
| 10           | /            |              |                     |     |                     |     |
| 11           | <del>/</del> | <del>/</del> |                     |     |                     |     |
| 12           | /            |              |                     |     |                     |     |
| 13           | /            |              |                     |     |                     |     |
| 14           | /            |              |                     |     |                     |     |
| 15           | /            |              |                     |     |                     |     |
| 16           | /            |              |                     |     |                     |     |
| 17           | <del>/</del> | <del>/</del> |                     |     |                     |     |
| 18           | <del>/</del> | <del>/</del> |                     |     |                     |     |
| 19           | <del>/</del> | <del>/</del> |                     |     |                     |     |
| 20           | <del>/</del> | <del>/</del> |                     |     |                     |     |
| 21           | <del>/</del> | <del>/</del> |                     |     |                     |     |
| 22           | /            |              |                     |     |                     |     |
| 23           | /            |              |                     |     |                     |     |
| 24           | /            |              |                     |     |                     |     |
| 25           | /            |              |                     |     |                     |     |
| 26           | /            |              |                     |     |                     |     |
| 27           | /            |              |                     |     |                     |     |
| 28           | /            |              |                     |     |                     |     |
| 29           | /            |              |                     |     |                     |     |
| 30           | /            |              |                     |     |                     |     |
| 31           | /            |              |                     |     |                     |     |
| 32           | /            |              |                     |     |                     |     |
| 33           | /            |              |                     |     |                     |     |
| 34           | /            |              |                     |     |                     |     |
| 35           | /            |              |                     |     |                     |     |
| 36           |              |              |                     |     |                     |     |
| 37           |              |              |                     |     |                     |     |
| 38           |              |              |                     |     |                     |     |
| 39           |              |              |                     |     |                     |     |
| 40           |              |              |                     |     |                     |     |
| 41           |              |              |                     |     |                     |     |
| 42           |              |              |                     |     |                     |     |
| 43           |              |              |                     |     |                     |     |
| 44           |              |              |                     |     |                     |     |
| 45           |              |              |                     |     |                     |     |
| 46           |              |              |                     |     |                     |     |
| 47           |              |              |                     |     |                     |     |
| 48           |              |              |                     |     |                     |     |
| 49           |              |              |                     |     |                     |     |
| 50           |              |              |                     |     |                     |     |
| TOTAL IND.   | 7            |              |                     |     |                     |     |
| TOTAL DEP.   | 21           |              |                     |     |                     |     |
| TOTAL CLAIMS | 28           |              |                     |     |                     |     |

|              | IND | DEP | IND | DEP | IND | DEP |
|--------------|-----|-----|-----|-----|-----|-----|
| 51           |     |     |     |     |     |     |
| 52           |     |     |     |     |     |     |
| 53           |     |     |     |     |     |     |
| 54           |     |     |     |     |     |     |
| 55           |     |     |     |     |     |     |
| 56           |     |     |     |     |     |     |
| 57           |     |     |     |     |     |     |
| 58           |     |     |     |     |     |     |
| 59           |     |     |     |     |     |     |
| 60           |     |     |     |     |     |     |
| 61           |     |     |     |     |     |     |
| 62           |     |     |     |     |     |     |
| 63           |     |     |     |     |     |     |
| 64           |     |     |     |     |     |     |
| 65           |     |     |     |     |     |     |
| 66           |     |     |     |     |     |     |
| 67           |     |     |     |     |     |     |
| 68           |     |     |     |     |     |     |
| 69           |     |     |     |     |     |     |
| 70           |     |     |     |     |     |     |
| 71           |     |     |     |     |     |     |
| 72           |     |     |     |     |     |     |
| 73           |     |     |     |     |     |     |
| 74           |     |     |     |     |     |     |
| 75           |     |     |     |     |     |     |
| 76           |     |     |     |     |     |     |
| 77           |     |     |     |     |     |     |
| 78           |     |     |     |     |     |     |
| 79           |     |     |     |     |     |     |
| 80           |     |     |     |     |     |     |
| 81           |     |     |     |     |     |     |
| 82           |     |     |     |     |     |     |
| 83           |     |     |     |     |     |     |
| 84           |     |     |     |     |     |     |
| 85           |     |     |     |     |     |     |
| 86           |     |     |     |     |     |     |
| 87           |     |     |     |     |     |     |
| 88           |     |     |     |     |     |     |
| 89           |     |     |     |     |     |     |
| 90           |     |     |     |     |     |     |
| 91           |     |     |     |     |     |     |
| 92           |     |     |     |     |     |     |
| 93           |     |     |     |     |     |     |
| 94           |     |     |     |     |     |     |
| 95           |     |     |     |     |     |     |
| 96           |     |     |     |     |     |     |
| 97           |     |     |     |     |     |     |
| 98           |     |     |     |     |     |     |
| 99           |     |     |     |     |     |     |
| 100          |     |     |     |     |     |     |
| TOTAL IND.   |     |     |     |     |     |     |
| TOTAL DEP.   |     |     |     |     |     |     |
| TOTAL CLAIMS |     |     |     |     |     |     |